

What is hepatitis C?

Hepatitis C is inflammation of the liver caused by the hepatitis C virus (HCV). Up to 8 out of 10 people infected with HCV develop a permanent (chronic) infection. The disease is responsible for killing 8,000-10,000 persons each year in the US.

How is hepatitis C virus (HCV) spread?

HCV is a bloodborne disease. It is spread through contact with infected blood, such as shared needles used for injection drug use. HCV can also be transmitted to the baby of an infected mother during delivery. However, this occurs in only 5 out of 100 deliveries involving HCV-positive women. HCV is not spread by breastfeeding. The risk of sexual transmission of HCV is believed to be low. HCV is not spread by sneezing, hugging, coughing, food or water, sharing eating utensils or drinking glasses, or casual contact.

Who is at risk for becoming infected with HCV?

The risk of HCV infection is higher in anyone who has ever injected drugs, people who have had a blood transfusion before 1992, healthcare workers with a blood exposure (e.g., by an accidental needle stick), children born to HCV-infected mothers, long-term dialysis patients, and people who have had multiple sex partners.

What are the symptoms of HCV infection?

Symptoms of HCV infection might include: fever, fatigue, yellow-colored skin (jaundice), dark urine, and light-colored stools. However, only about 10% of people newly infected with HCV have any symptoms at all. Approximately 80% of those infected with HCV become chronic carriers of HCV, and are able to spread the virus to others. Most chronic carriers have no symptoms of HCV for the first 10 or 20 years of the infection. As the infection progresses, chronic carriers may experience the symptoms mentioned above, as well as fluid retention, easy bruising, and personality changes. About 20% of chronic carriers eventually develop liver cirrhosis (scarring). Persons with cirrhosis from HCV are at a moderate risk for developing liver cancer.

How soon after exposure do symptoms appear?

Acute HCV has an incubation period between two and 25 weeks, although the average is seven to nine weeks. As mentioned above, the effects and symptoms of chronic liver disease can take years or decades to appear.

How is HCV diagnosed?

Exposure to HCV is diagnosed by testing blood (via an EIA test) for antibodies to HCV. HCV antibodies can be confirmed by a RIBA test. The *presence* of hepatitis C virus in a person can only be confirmed by nucleic acid testing (e.g., PCR). If someone continues to test PCR-positive for the hepatitis C virus six months or more after the initial exposure, then that person is likely a chronic carrier.

Can chronic HCV be treated?

Yes. At present, treatment (medicine) is effective in about half of patients. To protect their liver, anyone infected with HCV should also avoid drinking any alcohol or taking medications that

could damage the liver. Also, if not already immune, persons with HCV should be vaccinated to prevent hepatitis A and hepatitis B.

How can the spread of hepatitis C be prevented?

Unlike for hepatitis A and hepatitis B viruses, there is no vaccine for hepatitis C. Therefore, it is especially important to avoid behaviors that may spread HCV, including:

- Avoid contact with blood (wear gloves when touching blood and clean up spilled blood with bleach)
- Don't share razors or toothbrushes, or needles used for injecting drugs, tattooing or body piercing
- Do not have unprotected sex
- If you are infected with HCV, do not donate blood

If you have any questions, please call the Virginia HIV/STD/Viral Hepatitis Hotline: 1-800-533-4148

